

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is  
submitted between December 1 and January 31.

6663  
Lobbyist's Registration Number

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

## FOR OFFICE USE ONLY

Postmark Date: 1-22-98

REG

580878

1# 25537

\$ 10.00

SB

1. NAME Whitlow Stephen M.  
Last First MI

2. BUSINESS PHONE (504) 383-3796  
Area Code and Phone Number

3. BUSINESS ADDRESS 701 Main Street, Baton Rouge, LA 70802  
Street and No. City State Zip

4. EMPLOYER Allstate Insurance Company

5. EMPLOYER'S ADDRESS Allstate Plaza, Suite A-4, Northbrook, IL 60062  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Allstate Insurance Company

Address Allstate Plaza, Suite A-4, Northbrook, IL 60062

Business or purpose Insurance

Does this person pay you? Yes

If No, who pays you? \_\_\_\_\_

2. Name \_\_\_\_\_

Address \_\_\_\_\_

Business or purpose \_\_\_\_\_

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

# LOBBYING REGISTRATION FORM

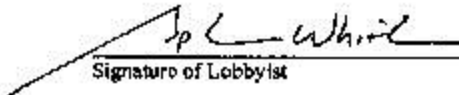
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Lobbyist's Registration Number

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of LouisianaParish of East Baton Rouge

Before me, the undersigned authority, personally came and appeared Stephen M. Whitlow, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

  
Signature of Lobbyist

Sworn to and subscribed before me on this 24th day of  
January, 1998.

Suzanne V. Chance  
Notary Public

Rev. 8/97

SUZANNE V. CHANCE, NOTARY PUBLIC  
EAST BATON ROUGE PARISH, STATE OF LOUISIANA  
MY COMMISSION IS FOR LIFE

